## National Park Service Death Valley National Park P O Box 579 or 271 Highway 190 Death Valley, CA 92328 760-786-3241



Deva\_permits@nps.gov

## Application for Special Use Permit – VEHICLE TESTING

Please supply the information requested below. **Attach additional sheets, if necessary, to provide required information**. A nonrefundable processing & monitoring fee of \$300.00 must accompany this application. You must allow sufficient time for the park to process your request; 30-60 days. You will be notified of the status of the application and the necessary steps to secure your final permit. Your permit must be accompanied by a \$5,000 license/permit bond and proof of liability insurance for \$1,000,000 US naming the United States of America as additional insured.

Enter either a social secu	urity number OR a tax I	D number: we do not require	e both.	
Applicant Name:		Company/Organization Name:		
Social Security #:		Tax ID #		
Street/Address:		Street/Address:		
City/State/Zip Code:		City/State/Zip Code:		
Telephone #:		Contact name:		
Cell phone #:		Telephone #:		
Fax #:NOT TO BE USED		Fax#:NOT TO BE USED		
Email:		Email:		
Description of Proposed	Activity (attach diagram	, attach additional pages if	necessary):	
Requested Location(s): U	JSE VTTDS TO SELEC	CT LOCATIONS		
DATE(S)	A ativity basisses	A ativity and a	Damayal as mulated	
Set up begins: (date and time)	Activity begins: (date and time)	Activity ends: (date and time)	Removal completed (date and time)	
USE VTTDS TO PROVID		( ( ( ) ( ) ( ) ( ) ( ) ( ) ( )	(5000-5000-5000-500)	

Maximum Number of Participants TO BE LISTED ON VTTDS (Please provide best estimate)

Maximum Number of vehicles: (attach parking plan) TO BE LISTED ON VTTDS

			Buses/oversized
ll equinment: attach	additional names if necessa	arv)	
	additional pages it riceesse	, , , , , , , , , , , , , , , , , , ,	
XTRA EQUIPMENT			
cluding addresses a	nd telephones; attach additi	onal pag	es if necessary
tivity on aita (inalyda	a cell phone number\ and ou	ıthorizod	to make decisions
tivity on-site (include ctivity:	e ceii pnone number) and at	utnorizea	to make decisions
L BÉ LISTED ON V	TTDS_		
t Amendment Rights	s?	□Y	□N
uested area?		$\square$ Y	$\square$ N
mit from the Nationa	al Park Service in the past?	$\square Y$	$\square$ N
permit dates and loc	ations on a separate page.)	)	
or issue a press rele	ease before the event?	□Y	□N
l material?		□Y	$\square$ N
lieve there will be at	tempts to disrupt, protest of	r	
yes, please explain	on a separate page.)	$\square$ Y	□N
onations or offer iter	ns for sale?		
may require an add	litional permit.)	□Y	□N
attach additional p	ages with information use	eful in ev	valuating your
• • • •		•	sanitary facilities,
•	•	n is comp	plete and correct, and
	Date		
	Title		
	cluding addresses and locativity:  L BE LISTED ON V  Amendment Rights  Lested area?  In the National permit dates and locativity:  I material?  I lieve there will be at yes, please explain conations or offer iter may require an address and locations or offer iter may require an address and locations or offer iter may require an address and locations or offer iter may require an address and locations or offer iter may require an address and locations or offer iter and require an address and locations or offer iter may require an address and locations or offer it	cluding addresses and telephones; attach additional pages with information users staging, sound systems, parking plan, security medical plan, use of any building, site clean-uger signature certifies that all the information giver ginformation or statements have been given.	cluding addresses and telephones; attach additional page tivity on-site (include cell phone number) and authorized ctivity:  L BE LISTED ON VTTDS  It Amendment Rights?  It Amen

Note: This is an application only, and does not serve as permission to conduct any special activity in the park. The information provided will be used to determine whether a permit will be issued. Send the completed application along with the application fee

If your request is approved, a permit containing applicable terms and conditions will be sent you. The permit must be signed by the responsible person and returned to the park for final approval by the Park Superintendent before the permitted activity may begin.

**Notice to Customers Making Payment by Personal Check:** When you provide a check as payment, you authorize us either to use information from your check to make a one-time electronic fund transfer from your account or to process the payment as a check transaction. When we use information from your check to make an electronic fund transfer, funds may be withdrawn from your account as soon as the same day we receive your payment, and you will not receive your check back from your financial institution.

## NOTICES

**Privacy Act Statement:** The Privacy Act of 1974 (5 U.S.C. 552a) provides that you be furnished with the following information in connection with information required by this application. This information is being collected to allow the park manager to make a value judgment on whether or not to allow the requested use. Applicants are required to provide their social security or taxpayer identification number for activities subject to collection of fees and charges by the National Park Service (31 U.S.C. 7701). Information from the application may be transferred to appropriate Federal, State, and local agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

**Paperwork Reduction Act Statement:** We are collecting this information subject to the Paperwork Reduction Act (44 U.S.C. 3501) to provide the park managers the information needed to decide whether or not to allow the requested use. All applicable parts of the form must be completed in order for your request to be considered. You are not required to respond to this or any other Federal agency-sponsored information collection unless it displays a currently valid OMB control number.

**Estimated Burden Statement:** Public reporting burden for this form is estimated to average 30 minutes per response including the time it takes to read, gather and maintain data, review instructions and complete the form. Direct comments regarding this burden estimate or any other aspect of this form to the Information Collection Clearance Officer, National Park Service, 1849 C Street NW. (1237), Washington, D.C. 20240

Title 18 U.S.C. Section 1001 makes it a crime for any person to knowingly and willfully make to any department or agency of the United States any false, fictitious, or fraudulent statements or representations as to any mater within its jurisdiction.